



You can also complete the application and file related documentation online at www.kela.fi/omakela (in Finnish) or www.fpa.fi/mittfpa (in Swedish)

More information is available at www.kela.fi/guarantee-pension



You can ask for more information or file an application for guarantee pension by calling our customer service number 020 634 2650.



Please make sure to complete the form carefully. Attach all necessary documentation.

We may contact you for further information if necessary.

Send the application and any supporting documents by mail. The address is Kela, PL 10, 00056 KELA

- i** Guarantee pension cannot be granted until you have applied for all other pensions, from Finland and from abroad, that you are eligible for. If you have moved to Finland and you have not previously claimed benefits from Kela, also complete form Y 77e. If you are going abroad, also complete form Y 38e.

Application period: Guarantee pension can be granted retroactively for a maximum of 6 calendar months from the date when it is applied for. The pension is always granted as of the first day of the month.

1. Applicant

Personal identity code Family name and given name

Phone number Email address

- i** Kela retrieves address data from the population data system.

2. Account number

3. Application

I am applying for

- guarantee pension
 a review of my guarantee pension
 a periodic review of my guarantee pension as of _____

4. Pensions and compensations

- i** Pensions received from Kela or from authorised pension providers need not be reported.

Do you receive or have you applied for pension or compensation from Finland or from abroad (e.g. voluntary supplementary pension or compensation on the basis of an accident at work or a traffic accident)?

- No
 Yes, I receive pension or compensation; please specify the pension or compensation that you receive and the start date of payment. Also specify the country and the provider institution. Please enclose a certificate or a decision.


- Yes, I have applied for pension or compensation; please specify the pension or compensation as well as the country and the institution to which you have submitted your application.

5. Enclosures

Section 4. Pensions and compensations

- A decision, proof of payment or documentation from the payer showing the gross amount per month of the pension and/or the compensation. Copies are acceptable.

6. Additional information

-  Write the number of the section you are referring to.

- Additional information on a separate sheet. Write your name and personal identity code on the sheet.

7. Signature

I declare that the information I have given is true and accurate. I will notify any changes.

Place and date Signature

If this form has been signed by someone other than the applicant, please state the reason for this.

8. Person helping the applicant to complete the application

Name and telephone number

Information obtained for the purpose of deciding the present matter may be used for other benefit-related matters, if so required under law. Any information obtained within the context of another benefit may also be used to decide the present matter.

Please contact us for more information about which outside sources we may access to obtain additional information about your circumstances and to whom we may provide such information.